



Student ID Number: _____
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## 2016-2017 SPECIAL CIRCUMSTANCES REQUEST FORM

Last name	First Name	M.I.	Social Security Number
Address (include apt. no.)			Date of Birth
City	State	Zip Code	Phone Number (include area Code)

**INSTRUCTIONS:** According to federal laws and regulations, a family's 2015 income is used to assess financial need for the 2016-2017 school year. However, if a family's expected 2016 income is lower, due to special circumstances, a financial aid administrator, under professional judgment, may be able to use the 2016 estimated income to assess financial need. Students who transfer from one school to another must understand that professional judgment decisions DO NOT transfer from one school to another. The federal system will use the original "base year" data and our office, by regulation, cannot accept another schools decision. Making a request does not ensure the request will be approved. Please provide information regarding your reduction in income by completing this form and providing the requested documentation. Our office will not be able to assess your financial need utilizing income from the year of 2016. We can only substitute the 2015 year income with income received during 2016.

1. Indicate the reason(s) for your reduction in income and other special circumstance(s) on page 1 and/or page 2, and attach any required documentation, **including** your/spouses and parent's 2015 Federal Tax Return Transcript and all 2015 W-2s.
2. Write a brief summary of your special circumstances, sign, date the summary and attach it to this form.
3. Complete the signature requirements on this form.

You must present your completed special circumstance form and all required documentation to the Financial Aid Office. The Financial Aid Director responds to all requests in writing within 10 school days from the receipt of your request.

**Please indicate the reason for your parent's (if dependent) or your and/or your spouses (if independent) change in income. Place an X next to each item that applies and attach the required documentation.**

- Loss of income from work. Provide proper documentation.
- Layoff. Provide a letter from employer stating effective date and anticipated return.
- Plant Closing. Provide a letter from employer stating effective date.
- Termination. Provide a letter from employer stating effective date. If this is not available, provide documentation from your local unemployment office.
- Disability. Date of disability (m/d/yr)\_\_\_\_\_. Attach documentation of the disability
- Loss of taxable income.
- Alimony. Provide court document(s) stating termination date of benefit.
- Unemployment. Provide a letter from the unemployment office stating termination date of benefit.
- Loss of untaxed income. Provide proper documentation.
- Child Support. Provide a letter or court document stating termination date of benefits.
- Worker's Compensation. Provide a letter from Bureau of Worker's Compensation stating termination date of benefits.

**Other Special Circumstances: Place an X next to each item that apply and attach the required documentation.**

**Decreases to the Adjusted Gross Income:**

- Medical or dental expenses. You have paid medical or dental expenses for the 2015 calendar year that are not covered by insurance and these expenses exceeds 11% of your total income. Provide a copy of Schedule A of 2015 Federal tax return(s) or copies of canceled checks for 2015 and confirmation of total amount paid by insurance in 2015.
- Conversion of a regular IRA into a Roth IRA. Provide proper documentation.

**Increases to the Cost of Attendance Budget:**

- Tuition expenses paid in 2015 at an elementary or secondary school. Provide proper documentation.
- Unusually high child care costs paid in 2015. Provide proper documentation.

**Changes to the Number in College:**

- Parents can be included in the number in college if they are enrolled at least half-time (6 hours) in a degree, certificate, or other program leading to a recognized educational credential at an institution with a program participation agreement under section 487, 34 CFR 668.14. Provide proper documentation.

**Report all income you have actually received from January 1, 2016 through today.** Then estimate all income you expect to receive through December 31, 2016. **YOU MUST ATTACH DOCUMENTATION OF ALL INCOME.** Documentation could include recent pay stubs with year-to-date earnings, a letter from an employer stating your total earnings, and an estimate of future income, etc. After January 1, 2017, you will be required to submit a copy of each applicable 2016 federal tax return transcript and W-2's.

My signature below certifies that the information provided above is true. I agree to provide proof of the information if requested. I understand that the penalty for providing false or misleading information is a \$20,000 fine, a prison sentence, or both. I understand that this information is for the 2016-2017 academic year.

I also understand the financial aid administrator will make a decision based upon the documentation provided and that the decision is final and cannot be appealed to any agency, including the U. S. Department of Education.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_ (dependent)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_ (independent)

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**For Office Use Only**

\_\_\_\_\_ Accepted per professional judgment based on submitted documentation.

\_\_\_\_\_ Denied per professional judgment based on submitted documentation.

**Comments:**


\_\_\_\_\_  
Signature of Financial Aid Professional

\_\_\_\_\_  
Date

## 2016 YEAR-TO-DATE INCOME CALCULATION

Please list your/spouse's and parent's, if applicable, year-to-date income received from January 1, 2016 through today.

	Parent's	Student's/Spouse's
Earnings from work:	\$	\$
Unemployment Benefits:	\$	\$
Workers Compensation:	\$	\$
IRA/Pension Distributions:	\$	\$
Welfare Benefits (TANF but no food stamps):	\$	\$
Child Support Received:	\$	\$
Alimony:	\$	\$
Other:	\$	\$
<b>Total Income:</b>	\$	\$

## FUTURE INCOME ESTIMATE

Please list your/spouse's and parent's, if applicable, estimated future income as of today through December 31, 2016.

	Parent's	Student's/Spouse's
Earnings from work:	\$	\$
Unemployment Benefits:	\$	\$
Workers Compensation:	\$	\$
IRA/Pension Distributions:	\$	\$
Welfare Benefits (TANF but no food stamps):	\$	\$
Child Support Received:	\$	\$
Alimony:	\$	\$
Other:	\$	\$
<b>Total Income:</b>	\$	\$

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_ (dependent)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_ (independent)